

PLAINTIFF	Shekeira Williams, et al.	COURT CASE NUMBER 13-cv-10083-FDS
DEFENDANT	Luis S. Spencer, et al.	TYPE OF PROCESS Civil

SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Luis S. Spencer, Commissioner of Correction	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
AT	50 Maple Street, Suite 3, Milford, Ma. 01757-3698	

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285	1
Shekeira Williams 16 Stockton Street Dorchester, Ma. 02124	Number of parties to be served in this case	6 U.S. MARSHAL'S SERVICE
	Check for service on U.S.A.	APR 2013

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold
 I am not too sure of his work hours but I would believe that his work hours may be between 9 a.m. thru 5 p.m. on Monday-Friday
 3

Signature of Attorney or other Originator requesting service on behalf of: Shekeira Spencer Williams	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER 617-676-7889	DATE 4/1/13
--	---	----------------------------------	----------------

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only first USM 285 if more than one USM 285 is submitted)</i>	Total Process 6	District of Origin No. 38	District to Serve No. 38	Signature of Authorized USMS Deputy or Clerk <i>M</i>	Date 4/23/13
--	--------------------	------------------------------	-----------------------------	--	-----------------

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) Danielle Moreira - Comm. Assistant	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
---	---

Address (complete only if different than shown above)	Date of Service 5/7/13	Time 12:00 pm
---	---------------------------	------------------

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
-------------	---	----------------	---------------	------------------	--------------------------------	------------------

REMARKS:

jds/